# THE LANCET Respiratory Medicine

### Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Stuart BD, Lee JS, Kozlitina J, et al. Effect of telomere length on survival in patients with idiopathic pulmonary fibrosis: an observational cohort study with independent validation. *Lancet Respir Med* 2014; published online June 17. http://dx.doi. org/10.1016/S2213-2600(14)70124-9.

Supplemental Table 1. Coding Telomerase Variants Discovered in Sporadic IPF Patients with Telomere Lengths Below the 10th Percentile of Normal (n=38).

_	Diagnosis	Gene	DNA Change	Predicted Protein Change
	IPF	TERT	c.2006G>A	R669Q
	IPF	TERT	$c.2593C>T^{1}$	R865C
	IPF	TERT	c.2647T>A	F883I
	IPF	TERT	$c.2869A>C^{1}$	S957R

<sup>&</sup>lt;sup>1</sup>These individuals were previously described in Tsakiri et. al. 2007, PMID:17460043 and Cronkhite et. al. 2008, PMID:18635888.

#### Supplemental Table 2. Univariate Survival Analysis of IPF Patients Across All Three Cohorts

	Dallas IPF cohort		Chicago IPF cohort		San Francisco IPF cohort	
	HR (95% CI)	P-value	HR (95% CI)	P-value	HR (95% CI)	P-value
Univariate analysis						
Age	1 (0.98 - 1.02)	0.71	0.99 (0.97 - 1.02)	0.68	1.03 (0.99 - 1.07)	0.17
Male Sex	1.42(0.9 - 2.24)	0.13	1.76(0.88 - 3.51)	0.11	1.27(0.49 - 3.31)	0.63
FVC, % predicted	0.75 (0.66 - 0.84)	< 0.0001	0.67 (0.55 - 0.81)	< 0.0001	0.78 (0.61 - 1.01)	0.057
DL <sub>CO</sub> , % predicted	0.67 (0.57 - 0.79)	< 0.0001	0.61(0.49 - 0.76)	< 0.0001	0.79(0.61 - 1.02)	0.071
Telomere Length	0.32(0.14 - 0.72)	0.0058	0.31 (0.11 - 0.84)	0.021	0.38 (0.14 - 1.06)	0.065
GAP score	2.76(1.9 - 4.01)	< 0.0001	3.49(1.89 - 6.42)	< 0.0001	2.72(1.29 - 5.74)	0.0084

The reported hazard ratios are for a 1-year difference in age, a 10% difference in FVC and  $DL_{CO}$  measurements, and a 1-unit difference in log T/S ratio and GAP score. Data for FVC or  $DL_{CO}$  (or both) were unavailable for some patients. The univariate analysis included all patients with available data (as shown in Table 1). Patients who were unable to do the  $DL_{CO}$  test (eight in the Dallas cohort, one in the Chicago cohort, and one in the San Francisco cohort) were included in the analysis using the GAP score. log IPF=idiopathic pulmonary fibrosis. log HR=hazard ratio. log FVC=forced vital capacity. log l

## Supplemental Table 3. Univariate Analysis of Transplant-free Survival of Non-IPF ILD Patients in the Dallas Cohort.

	Dallas non-IPF cohort		
	HR (95% CI)	P-value	
Univariate analysis			
Age	1.03 (1 - 1.05)	0.022	
Male Sex	1.81(1.05 - 3.12)	0.033	
FVC, % predicted	0.8(0.7 - 0.92)	0.0015	
DL <sub>CO</sub> , % predicted	0.51 (0.39 - 0.67)	< 0.001	
Telomere Length	0.72 (0.23 - 2.23)	0.57	

The reported hazard ratios are for a 1-year difference in age, a 10% difference in FVC and  $DL_{CO}$  measurements, and a 1-unit difference in log T/S ratio and GAP score. Data for  $DL_{CO}$  was unavailable for some patients. The univariate analysis included all patients with available data (as shown in Table 1). IPF=idiopathic pulmonary fibrosis. ILD=interstitial lung disease. HR=hazard ratio. FVC=forced vital capacity.  $DL_{CO}$ =diffusion capacity for carbon monoxide.

## Supplemental Table 4. Sensitivity Analyses for Survival of IPF Patients Across Three Cohorts (with Censoring of Lung Transplantation Events).

	Dallas IPF cohort		Chicago IPF cohort		San Francisco IPF cohort	
	HR (95% CI)	P-value	HR (95% CI)	P-value	HR (95% CI)	P-value
Univariate analysis						
Age	1.02 (1.00 - 1.04)	0.099	1.00 (0.97 - 1.03)	0.94	1.06 (1.01 - 1.11)	0.015
Male sex	1.18(0.72 - 1.94)	0.5	1.6(0.8 - 3.21)	0.19	1.06 (0.4 - 2.83)	0.90
FVC, % predicted	0.79(0.7 - 0.9)	< 0.0001	0.65(0.53 - 0.8)	< 0.0001	0.80 (0.61 - 1.06)	0.12
DL <sub>CO</sub> , % predicted	0.63(0.52 - 0.77)	< 0.0001	0.65 (0.52 - 0.80)	0.00010	0.79(0.59 - 1.05)	0.10
Telomere Length	0.34(0.14 - 0.85)	0.021	0.27 (0.09 - 0.75)	0.012	0.27 (0.09 - 0.82)	0.021
GAP score	3.4 (2.2 - 5.26)	< 0.0001	3.58 (1.89 - 6.78)	< 0.0001	3.61 (1.51 - 8.61)	0.0038
Multivariable analysis						
(individual covariates)	(n=135)		(n=123)		(n=49)	
Age	1.03 (1.00 - 1.07)	0.040	1.00 (0.97 - 1.04)	0.90	1.06 (1.00 - 1.12)	0.034
Male sex	1.23(0.7 - 2.13)	0.47	1.92(0.75 - 4.88)	0.17	1.02(0.28 - 3.80)	0.97
FVC, % predicted	0.89(0.72 - 1.09)	0.24	0.81 (0.62 - 1.06)	0.13	0.90(0.66 - 1.24)	0.53
DL <sub>CO</sub> , % predicted	0.63 (0.49 - 0.8)	0.00017	0.66 (0.51 - 0.86)	0.0022	0.73(0.52 - 1.01)	0.061
Telomere Length	0.35 (0.11 - 1.15)	0.085	0.11 (0.03 - 0.41)	0.0011	0.13(0.03 - 0.52)	0.0040
Multivariable analysis						
(GAP score)	(n=143)		(n=124)		(n=50)	
GAP score	3.27 (2.1 – 5.1)	<0.0001	3.8 (1.94 - 7.42)	<0.0001	3.81 (1.62 - 8.97)	0.0022
Telomere length	0.6(0.21 - 1.76)	0.35	0.2(0.05 - 0.74)	0.016	0.14(0.03 - 0.53)	0.0041

The reported hazard ratios are per a 1-year difference in age, a 10% difference in FVC and  $DL_{CO}$  measurements, and a 1-unit difference in log T/S ratio and GAP score. Data for FVC or  $DL_{CO}$  (or both) were unavailable for some patients. The univariate analysis included all patients with available data (as shown in Table 1). Patients who were unable to do the  $DL_{CO}$  test (eight in the Dallas cohort, one in the Chicago cohort, and one in the San Francisco cohort) were excluded from the multivariable analysis when using individual covariates, but included when using the GAP score. IPF=idiopathic pulmonary fibrosis. HR=hazard ratio. FVC=forced vital capacity.  $DL_{CO}$ =diffusion capacity for carbon monoxide. GAP=gender-age-physiology.